

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000016278

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** TROPICAL MOULDINGS, LLC.

**Current Principal Place of Business:**

6901 NW 87TH AVE  
MIAMI, FL 33178 US

**New Principal Place of Business:**

6911 NW 87TH AVE  
MIAMI, FL 33178 US

**Current Mailing Address:**

6901 NW 87TH AVE  
MIAMI, FL 33178 US

**New Mailing Address:**

6911 NW 87TH AVE  
MIAMI, FL 33178 US

**FEI Number:** 20-4313850

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VALDIVIA, DANIEL A  
18185 SW 29TH STREET  
MIRAMAR, FL 33029 US

**Name and Address of New Registered Agent:**

GUIULFO, ROBERTO R MGR  
16325 GOLF CLUB RD  
303  
WESTON, FL 33326 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERTO GUIULFO

04/18/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GUIULFO, ROBERTO R MGRM  
Address: 16325 GOLF CLUB ROAD, APT.303  
City-St-Zip: WESTON, FL 33326 US

Title: D  
Name: JARAMA, SONIA C MRS.  
Address: 6911 NW 87TH AVE  
City-St-Zip: MIAMI, FL 33178 US

Title: D  
Name: FACHIN PINEDO, CARLOS A MR  
Address: 6911 NW 87TH AVE  
City-St-Zip: MIAMI, FL 33178 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERTO GUIULFO

MGRM

04/18/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date